PTO/SB/30 (08-03)

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| REQUEST |
|----------------------|
| FOR |
| ED EXAMINATION (RCE) |
| TRANSMITTAL |

Address to:
Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

NTINUE

| Application Number | 09/653,384 |
|------------------------|------------------|
| Filing Date | 09/01/2000 |
| First Named Inventor | Steven Sholem |
| Art Unit | 3626 |
| Examiner Name | Carolyn M. Bleck |
| Attorney Docket Number | SHOL-0587 |

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

| Submission required under 37 CFR 1.114 Note: If the RCE is proper, any previously filed unentered and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s). a. Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked. Consider the arguments in the Appeal Brief or Reply Brief previously filed on | | | | |
|--|--|--|--|--|
| ii. ☐ Other b. ☑ Enclosed i. ☑ Amendment/Reply iii. ☐ Information Disclosure Statement (IDS) ii. ☐ Affidavit(s)/Declaration(s) iv. ☐ Other | | | | |
| 2. Miscellaneous a. □ Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required) b. □ Other | | | | |
| 3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed. a. The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 19-0513 RCE fee required under 37 CFR 1.17(e) Extension of time fee (37 CFR 1.136 and 1.17) Other any additional fees or redit over payment | | | | |
| b. Check in the amount of \$ 395 enclosed c. Payment by credit card (Form PTO-2038 enclosed) WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. | | | | |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED | | | | |
| Name (Print/Type) Kenneth C. Booth Registration No. (Attorney/Agent) 42,342 | | | | |
| Signature Level Co Booth Date January 20, 2005 | | | | |
| CERTIFICATE OF MAILING OR TRANSMISSION | | | | |
| I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner For Patents, P.O. Box 1450, Alexandria, VA 22313-1450 or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below. | | | | |
| Name (Print/Type) Heather C.lark | | | | |
| Signature HASWW UMW Date January 20, 2005 | | | | |

This collection of information is required by 37 CFR 1.114. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing the burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Doc Code:

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| Fees pursual to MAN Consolidated Appropriations Act, 2005 (H.R. 4818). | | Complete if Known | | |
|--|--------------------|----------------------|----------------|--|
| , | | Application Number | 09/653,384 | |
| FEE TRANSI | WIIIAL | Filing Date | 09/01/2000 | |
| for FY 200 | 15 | First Named Inventor | Sholem | |
| | | Examiner Name | Bleck, Carolyn | |
| Applicant claims small entity statu | s. See 37 CFR 1.27 | Art Unit | 3626 | |
| TOTAL AMOUNT OF PAYMENT | (\$) \$620.00 | Attorney Docket No. | SHOL-0587 | |
| METHOD OF PAYMENT (check a | I that apply) | | | |

| METHOD OF PAYMENT (check all that apply) | | | | | | | |
|---|------------------|--------------------------|-------------------|--------------------------|--------------------|--------------------------|-----------------------|
| ☑ Check ☐ Credit | Card | Money Order | None | Other (| (please identify): | | |
| Deposit Dep | osit Account | Number: | 19-0513 | Deposit A | ccount Name: | Schmeiser O | lsen & Watts, LLP |
| For the above-identified | deposit accour | t, the Director | is hereby authori | zed to: (check all t | that apply) | | |
| Charge | fee(s) indicated | l below | | Charge | fee(s) indicated | below, except for | the filing fee |
| Charge | any additional t | fee(s) or any ur | nderpayment of | Credit a | ny overpayment | s | |
| WARNING: Information on to information and authorization | this form may | become publi | c. Credit card in | nformation shoul | d not be includ | ed on this form | . Provide credit card |
| FEE CALCULATION | | | | | | | |
| 1. BASIC FILING, SEAR | CH, AND EX | AMINATION | FEES | | | | |
| | FILING F | | SEARCH | | EXAMINA | ATION FEES | |
| Application Type | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fees Paid(\$) |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | |
| , | | 100 | Ū | Ü | Ū | Ū | |
| 2. EXCESS CLAIM FEE | S | | | | | Foo (\$) | Small Entity |
| Fee Description Each claim over 20 (inclu | idina Paissus | ae) | | | | <u>Fee (\$)</u> 50 | <u>Fee (\$)</u> 25 |
| Each independent claim of | • | • | e) | | | 200 | 100 |
| Multiple dependent claims | • | ing recode | ٥, | | | 360 | 180 |
| manple dependent claim | - | | | | | Multiple C | Dependent Claims |
| Total Claims | Extra Claim | s Fee (\$ |) <u>F</u> | ee Paid (\$) | | Fee (\$) | Fee Paid (\$) |
| 20 or HP = | = | x | \$25.00 = | \$0.00 | | | |
| HP = highest number of total | • | - | | | | | |
| Indep. Claims - 3 or HP = | Extra Claim = | |) §100.00 = | ee Paid (\$) _ \$0.00 | | ě | |
| HP = highest number of independent claims paid for, if greater than 3. | | | | | | | |
| APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listing under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | | | | | | | |
| Total Sheets | Extra She | <u>ets</u> | Number of each | additional 50 or | fraction thereo | <u>f Fee (\$)</u> | Fee Paid (\$) |
| - 100 = / 50 (round up to a whole x <u>\$125.00</u> = <u>\$0.00</u> | | | | | | | |
| 4. OTHER FEE(S) Fee Paid (\$) | | | | | | | |
| Non-English specification, \$130 fee (no small entity discount) Other (e.g. late filing surcharge): Request for Continued Examination, Request for Extension of Time \$620.00 | | | | | | | |

| SUBMITTED BY | | | | |
|-------------------|---|--------|-----------|------------------|
| Signature | Kenneth Color (Altorney/Agent) Registration No. (Altorney/Agent) | 42,342 | Telephone | (480) 655-0072 |
| Name (Print/Type) | Kenneth C. Booth | | Date | January 20, 2005 |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Atty. Docket No.: SHOL-0587

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Response Transmittal

Sholem, Steven

Filed: 09/01/2000

For: METHOD AND APPARATUS FOR TRACKING THE

RELATIVE VALUE OF MEDICAL SERVICES

Mail Stop Non-Fee Amendment Commissioner of Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing in the above-identified Application is a:

- 1. Office Action Response; and
- 2. Postcard.

No additional fee is required.

The fee has been calculated as shown below: (Col. 1)

| 1 | |
|-------------------|---|
| | CERTIFICATION OF FACSIMILE TRANSMISSION |
| I he | ereby certify that this paper is being facsimile transmitted to Patent and Trademark Office on the date shown below. |
| Ø | CERTIFICATE OF MAILING |
| cor clas Am | ereby certify that I am depositing the enclosed or attached respondence with the United States Postal Service as first as mail in an envelope addressed to Mail Stop Non-Fee tendment, Commissioner of Patents, Alexandria, VA 223 13-10 on November 24, 2004 |

| CLAIMS REMAINING AFTER AMENDMENT | | | HIGHEST NO. PREVIOUSLY PAID FOR | PRESENT EXTRA | | |
|-------------------------------------|-----|-------|---------------------------------------|------------------|--|--|
| TOTAL | 21 | MINUS | 64 | = 0 | | |
| INDEPENDENT | Γ 1 | MINUS | 11 | = 0 | | |
| ONE MONTH EXTENSION OF TIME | | | | | | |

(Col. 2)

| RATE | ADDITIONAL FEE | | | | | |
|------------|-------------------|--|--|--|--|--|
| x \$ 9.00= | \$.00 | | | | | |
| x \$42.00= | \$.00 | | | | | |
| \$ 55.00 | \$.00 | | | | | |
| Total | \$.00 | | | | | |

Small Entity

| | | Total | |
|----|---|-------|--|
| | A check in the amount of to cover fee is enclosed. | | |
| XX | The Commissioner is hereby authorized to charge payment of the following fees associany overpayment to Deposit Account No. 19-0513 A duplicate copy of this s | | |
| | XX Any additional filing fees required under 37 C.F.R. §1.16. | | |
| | Any patent application processing fees under 37 C.F.R. 81.17. | | |

Date:

November 24, 2004

Respectfully submitted,

(Col. 3)

Schmeiser, Olsen & Watts LLP 18 East University Drive, #101 Mesa, Arizona 85201 Tel: (480) 655-0073

Kenneth C. Booth

Registration No.: 42,342